

**MOTOROLA**
FAX TRANSMITTAL SHEET

Motorola, Inc.
Intellectual Property Section
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12

Number of Pages (including this page)

OFFICIAL

Date: October 17, 2003

To: Examiner Tsuleun R. Lei

Location: United States Patent and Trademark Office, Group 2686

Fax No.: (703) 872-9314

From: Hisashi D. Watanabe Registration No. 37,465

Subject: Serial No. 09/629,321

Docket No. PF01869NA

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MESSAGE:

Enclosed herewith, please find:

- ☒ Amendment
- ☒ Amendment Transmittal Form
- ☒ Fee Transmittal Form
- ☐ Petition for Extension of Time

PLEASE GIVE THESE PAPERS TO:

EXAMINER:
GROUP ART UNIT:
SERIAL NO.:
FILED:
INVENTOR:

Lei, Tsuleun R.
2686
09/629,321
July 31, 2000
Hill, Thomas C., et al.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

ADMENDMENT TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/629,321	
	Filing Date	July 31, 2000	
	First Named Inventor	Hill, Thomas C., et al.	
	Group Art Unit	2686	
	Examiner Name	Lei, Tsuleun R.	
	Attorney Docket Number	PF01869NA	

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Fee Address Indication Form <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below) <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Remarks:		

CORRESPONDENCE ADDRESS	
<input type="checkbox"/> Customer Number or Bar Code Label	<div style="border: 1px solid black; padding: 2px; text-align: center;">20280</div> <small>(Insert Customer No. or Attach bar code label here)</small>
or <input type="checkbox"/> Correspondence address below	

Name: Motorola, Inc.	
Address: Intellectual Property Department	
600 North U.S. Highway 45, AN475	
City: Libertyville	State: Illinois
Country: USA	Zip Code: 60048
Telephone: 847-523-2322	Fax: 847-523-2350

Name (Print/Type) Hisashi D. Watanabe	Registration No. 37,465
Signature <i>Hisashi D. Watanabe</i>	Date October 17, 2003

CERTIFICATE OF TRANSMISSION	
I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office Fax No. (703) 872-9314 on this date: October 17, 2003.	
Typed or printed name: Hisashi D. Watanabe	Date October 17, 2003
Signature <i>Hisashi D. Watanabe</i>	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

FEE TRANSMITTAL For FY 2003 <i>Patent fees are subject to annual revision.</i>		Application Number	09/629,321
		Filing Date	July 31, 2000
		First Named Inventor	Hill, Thomas C., et al.
		Group Art Unit	2686
		Examiner Name	Lei, Tsuleun R.
TOTAL AMOUNT OF PAYMENT		Attorney Docket Number	PF01869NA
(\$) 0.00			

METHOD OF PAYMENT	FEE CALCULATION (continued)
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1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account	50-2117
Deposit Account Name	Motorola, Inc.

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status See 37 CFR 1.27

3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	Surcharge - late filing fee or oath	
127	50	Surcharge - late provisional filing fee or cover sheet	
138	130	Non-English specification	
147	2,520	For filing a request for ex parte reexamination	
112	920*	Requesting publication of SR prior to Examination action	
113	1,840*	Requesting publication of SR after Examination action	
115	110	Extension for reply within first month	
116	410	Extension for reply within second month	
117	930	Extension for reply within third month	
118	1,450	Extension for reply within fourth month	
128	1,970	Extension for reply within fifth month	
119	320	Notice of Appeal	
120	320	Filing a brief in support of an appeal	
121	280	Request for oral hearing	
138	1,510	Petition to institute a public use proceeding	
140	110	Petition to revive - unavoidable	
141	1,300	Petition to revive - unintentional	
142	1,300	Utility issue fee (or reissue)	
143	470	Design issue fee	
144	630	Plant issue fee	
122	130	Petitions to the Commissioner	
123	50	Petitions related to provisional applications	
126	180	Submission of Information Disclosure Sheet	
581	40	Recording each patent assignment per property (times number of properties)	
146	750	Filing a submission after final rejection (27 CFR § 1.129(a))	
149	750	For each additional invention to be examined (37 CFR § 1.129(b))	
179	750	Request for Continued Examination (RCE)	
169	900	Request for expedited examination of a design application	

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	750	Utility filing fee	
106	330	Design filing fee	
107	520	Plant filing fee	
108	750	Reissue filing fee	
114	160	Provisional filing fee	

SUBTOTAL (1) (\$) 0.00

2. EXTRA CLAIM FEES

Total Claims		Extra Claims	Fee Paid
18	- 20 =	2 X 18 =	0
3	- 3 =	0 X 84 =	0

Multiple Dependent

Large Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
103	18	Claims in excess of 20	
102	84	Independent claims in excess of 3	
104	280	Multiple dependent claims, if not paid	
109	84	** Reissue independent claims over original patent	
110	18	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$) 0.00

SUBMITTED BY

Name (Print/Type)	Hisashi D. Watanabe	Reg. No. (Atty/Agent)	37,465
Signature	<i>Hisashi D. Watanabe</i>	Date	October 17, 2003